

Los Angeles Police Department  
Complaint Adjudication Form

CF No.

19-002934

07/22/2020

Date investigation received by commanding officer as complete

**EMPLOYEE:**☐ Multiple Employees

LAST NAME, FIRST, M.I.

Moore, Michel

☐ UNKNOWN

SERIAL NO.

23506

RANK AT TIME OF INCIDENT

Chief of Police

AREA/DIV. AT TIME OF INCIDENT

Chief of Police

DUTY STATUS

☒ ON ☐ OFF

ARRESTED

☐ YES ☒ NO

ASSIGNMENT TYPE AT TIME OF INCIDENT

☐ PATROL ☐ AREA DETECTIVE ☒ ADMIN/COVETED ☐ SPECIALIZED DIV ☐ UNIFORM SEU

COMPLAINANT (LAST NAME, FIRST, M.I.)

Anonymous

☐ DEPARTMENT**ADJUDICATION SUMMARY:** Enter allegation number(s) under the respective dispositions. Check Military Endorsement for the disposition recommended.

	SUSTAINED	NOT RESOLVED	UNFOUNDED	EXONERATED	INSUFFICIENT EVIDENCE TO ADJUDICATE	OTHER JUDICIAL REVIEW	PENALTY						
							No Penalty	Admon	OR	Susp (days)	Demotion	Discharge or Term on Probation	BOR
Division Commanding Officer							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Area Commanding Officer							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Group Commanding Officer			1,2				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bureau Commanding Officer			1,2				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chief of Police							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**PENALTY RATIONALE:** (Explain, if recommendation deviates from Penalty Guide.)☐ PTC (See attached Form 01.13.00 for findings and penalty recommendation.)


See attached Letter of Transmittal.

☐ Continued on back

DIVISION COMMANDING OFFICER'S SIGNATURE

SERIAL NO. DATE  
N4689 08/19/2020

EMPLOYEE'S SIGNATURE (ADMONISHMENT ONLY) SERIAL NO. DATE


 23506 8-21-20

GROUP/AREA COMMANDING OFFICER'S SIGNATURE

SERIAL NO. DATE  
N3145 8.19.20☒ Concur☐ Military Endorsement (See back page.)

BUREAU COMMANDING OFFICER'S SIGNATURE

SERIAL NO. DATE

N6226  
D3825☒ Concur☐ Military Endorsement (See back page.)

Internal Affairs Group Use Only

**FINAL  
DEPARTMENT  
ACTION**
☐ CSC OVERRULE☐ BOR - GUILTY (Counts: )☐ BOR - NOT GUILTY (Counts: )

NAMED EMPLOYEE (LAST NAME, FIRST, M.I.)

Moore, Michel

☐ UNKNOWN

CF No.

19-002934

**EMPLOYEE INTERVIEW****EMPLOYEE INVESTIGATION REVIEW****Other than Sustained, Admonishment, or Official Reprimand**

This complaint investigation has been completed. A review of the investigation has resulted in the proposed findings listed on the front of this form. You have the opportunity to review the completed investigation, including the letter of transmittal, and to make a written response. Any such response must be in writing and submitted to the commanding officer listed on the front of this form with 30 calendar days of this service. Thirty days from that date will be:

**NOTICE OF PROPOSED DISCIPLINARY ACTION****Notice of Proposed Disciplinary Action**

This complaint investigation has been completed. A review of the investigation has resulted in the proposed findings listed on the front of this form. You are hereby notified that I am proposing to the Chief of Police that you receive the penalty specified on the front of this form for the allegations sustained in the findings, which are attached to this form. You have an opportunity to respond orally or in

writing by:

Your response will be reviewed by the Chief of Police for evaluation prior to adjudication of this matter.

The employee shall initial the boxes that apply:

☐ I have received a copy of the investigative material(s).

☐ I intend to submit a response.

☒ I waive my right to receive a copy of the investigative material(s).

☒ I do not intend to submit a response.

☒ I was informed of my right to representation prior to discussing this matter.

☐ I have received documentation regarding my fitness and suitability to perform the duties of my position (civilian employees).

I have discussed this matter with the employee.

Your signature acknowledges receipt of materials, but does not indicate concurrence with my recommendations.

COMMANDING OFFICER'S SIGNATURE

SERIAL NO. DATE

EMPLOYEE'S SIGNATURE

SERIAL NO. DATE

C/O'S RESPONSE TO EMPLOYEE:

Date response received:

☐ No employee response was submitted by the date specified.

☐ After reviewing the employee's response, I found no new information to cause me to change my recommended findings and/or penalty.

☐ A review of the employee's response has caused me to take the following actions: (See below.)

☐ See continuation page.

MILITARY ENDORSEMENT RATIONALE:

☐ See continuation page.